	GN FINANCE REPORT MMITTEES OF WISCO	· · · · ·	
Is This Report an Amendment:	No No		
Instructions for completing schedules are on the	back of each schedule.		
COMMITTEE IDENTIFICATION			
Name of Committee Friends of Staskunas			
Stroet Address 2010 South 103rd Ct.		(DFFICE USE ONLY
City. State and Zip Code West Allis, Wi. 53227			
Please check if address is different than previously reported	and complete the Campaign R	egistration Statement in th	e back of this form. 🔲
NAME OF REPORT			
January Continuing Pre-Primary _			
July Continuing Pre-Election 2		Fall Special	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 0	
1B. Contributions from Committees (Transfers-In)	\$ 0	\$ 0	
1C. Other Income and Commercial Loans	\$.53	\$.53	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$.53	\$.53	
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 0	\$ 0	
2B. Contributions to Committees (Transfers-Out)	\$ 0	\$ 0	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 0	\$ 0	enc - y
CASH SUMMARY			13.1 13.1 13.1
Cash Balance Beginning of Report	\$ 4,182.71		
Total Receipts	\$.53		in the second se
Subtotal	\$ 4,183.24		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Total Disbursements	\$ 0		16
CASH BALANCE END OF REPORT	\$ 4,183.24		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	O \$		
LOANS (Balance at the Close of This Period-3B)	\$ 9,300		
I certify that I have examined this report and to the best	of my knowledge and belief i	t is true, correct and com	plete.
Type or Print Name of Candidate or Treasurer Anthony J. Staskunas	Signature of Candidate or Treasurer		-27-2020
	Email WV/	Daytin	ne Phone:541-9440

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.



RECEIPTS Other Income and Commercial Loans

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Complete Committee Name Friends of Staskunas

Instructions for completing schedules are on the back of each schedule.

Date	for completing schedules are on the back of each sch Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount	
1-3-20	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.18	
2-5-20	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest	.18	
3-5-20	BMO Harris Bank P.O. Box 94033 Palatine, Wi. 60094	interest	.17	
	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest		
	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest		
	BMO Harris Bank P.O. Box 94033 Palatine, Il. 60094	interest		
	·			
		·		
<u> </u>	s 53			
	.53 \$			
		TOTAL OTHER INCOME	.53	

SCHEDULE 3-B

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

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TOTAL OUTSTANDING LOANS \$ 9,300

Complete Committee Name Friends: of Staskunas

Instructions for completing schedules are on the back of	each schedule.		•		
Full Name, Mailing Address and Zip Code of Lo Tony Staskunas 2010 South 103rd Ct. 3-27-20 West Allis, Wi. 532	an Source	Outstanding Obligations Beginning of This Period	Period	Cumulative Payments This Period	Outstanding Obligations End of This Perio
List All Endorsers or Guarantors (if any)		9,300-	0	. 0	9,300
Full Name, Mailing Address and Zip Code of Guarantor	Occupation	:			· · · · · · · · · · · · · · · · · · ·
	Amount Guarar	nteed Outstanding	·		
	\$	_		•	
Full Name, Mailing Address and Zip Code	Occupation		·		
of Guarantor			:		
	1	teed Outstanding			
·	\$			_	
Full Norma Halling Add			•		
Full Name, Mailing Address and Zip Code of Loar Date	1 Saurce	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations - End of This Period
1 1			1 0,100	:	
List All Endorsers or Guarantors (if any)					
Full Name, Mailing Address and Zip Code					
of Guarantor	Occupation		•		
	Amount Guarante	ed Outstanding			•
	\$		•	. •	
Full Name, Mailing Address and Zip Code of Guarantor	Occupation ·	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	Amount Guarante	ad Ordetondina			
	\$	er onemiding	•		
		•			
Full Name, Mailing Address and Zip Code of Loan S	Source -	Outstanding Obligations		Cumulative Payments	Outstanding Obligations
Date		Beginning of This Period	New Loans This Period	This Period	End of This Period
1 1					
List All Endorsers or Guarantors (if any)		·			
Full Name, Mailing Address and Zip Code	Occupation				
of Guarantor	Occupation		•		
	Amount Guaranteed	d Outstanding			
	, \$	•			•
Full Name, Mailing Address and Zip Code of Guarantor	Occupation				
	Amount Guaranteed	i Outstanding			
•	\$	•			-
	<u>L </u>				
	•	SUBTOTAL OUT	STANDING LOANS	THIS PAGE \$	9,300